

Absence of standard protocols on COVID-19 testing leaves nursing homes vulnerable

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A resident of Parkview Place, a personal care home in central Winnipeg, leaves the building on a stretcher, on Oct. 28, 2020.

SHANNON VANRAES/THE GLOBE AND MAIL

Canada's lack of national public health standards governing testing residents and staff in nursing homes for COVID-19 is leaving many regions without a crucial tool for detecting and controlling the spread of infections as a growing number of facilities are declaring outbreaks.

British Columbia, Alberta and Manitoba do not require routine, surveillance testing of staff in long-term care homes, missing opportunities to detect the coronavirus before an outbreak is declared.

Government officials in these provinces also do not require staff to be tested for the virus even after a home declares an outbreak of COVID-19. The protocol is to screen staff for symptoms at the beginning and end of their shifts. Testing is reserved for residents who have symptoms of the virus.

Health care experts say it is difficult to curb the spread of the virus in long-term care homes without vigorous testing. Simply monitoring residents for symptoms, they say, fails to detect the virus in many elderly people afflicted with COVID-19 who are asymptomatic.

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Deaths in long-term care homes are climbing at an alarming rate in several provinces as the virus becomes more prevalent in the community. In Ontario, one in six long-term care homes have an outbreak of COVID-19 and 133 residents have died this month alone. In Winnipeg, where the per capita infection rate tops 13 per cent, indicating a dangerous level of spread of the virus, 25 of the city's 38 homes are in outbreak. Alberta has 31 long-term care homes with an outbreak of the virus.

Bob Bell, a former hospital chief executive officer and deputy health minister in Ontario, is calling for frequent, routine testing in nursing homes across the country.

"If we were to screen people coming into long-term care twice a week instead of every two weeks with a test that's appropriate, we would drop the death rate," Dr. Bell said in an interview.

British Columbia Seniors Advocate Isobel Mackenzie also said one positive case of COVID-19 in a home should trigger testing of every staff member.

“The key to stopping the outbreak from spreading,” she said, “is to quickly get in and make sure there are no staff who are shedding the virus.”

During the second wave of the virus, 108 residents have died of COVID-19 at four homes owned by Revera Inc., a private, for-profit chain operator. Two of its homes in Winnipeg are among the hardest hit in Canada.

A Globe and Mail review of updates posted on Revera’s website on outbreaks at 25 of the 74 long-term care homes the company owns in Ontario, Manitoba, Alberta and British Columbia reveals the country’s patchwork approach to testing staff and residents for the virus.

Revera is a wholly owned subsidiary of the Public Sector Pension Investment Board, a federal Crown corporation that invests and manages the pension savings of public servants, including members of the Canadian Armed Forces and the RCMP.

In Ontario, 32 residents at Kennedy Lodge Long Term Care Home in Scarborough have died since an outbreak was declared on Oct. 2. The virus has claimed 15 lives at South Terrace Continuing Care Centre in Edmonton since Oct. 22.

And in Winnipeg, 36 residents at Maples Personal Care Home have died over the past four weeks. Another 25 residents at Parkview Place Long Term Care in Winnipeg have died from an outbreak of COVID-19 that began two months ago.

Before the latest outbreaks, Revera executives were confident their new pandemic playbook would help the company avoid a repeat of the spring, when COVID-19 tore through long-term care homes in Ontario.

Revera set up a 10-member panel of leaders in medicine, health policy and geriatrics in July to help it navigate a second wave of the virus. In response to the panel led by Dr. Bell, a surgeon, the company introduced enhanced infection control and screening and testing practices in its homes.

But Revera’s efforts to adopt standardized processes in all of its homes have been frustrated by inconsistent policies among provincial public health officials, said Rhonda Collins, the company’s chief medical officer.

“After the first wave, we put our heart and soul into trying to do a deep dive to analyze what happened, what we need to do differently,” Dr. Collins said in an interview. “We’ve thrown every resource we can think of at this.”

Whether residents and staff get tested for the virus depends on a home's location, the Revera updates show.

In Ontario, long-term care homes routinely test staff for the virus every two weeks. Many local public health units in the province also immediately test residents and staff in a home once an outbreak is declared.

Ottawa Public Health, for example, ordered tests for all staff and residents at Revera's Longfields Manor Long Term Care Home after an outbreak was declared on Oct. 4. Four residents at the Ottawa home have died of the virus.

Revera's notice for South Terrace in Edmonton, by contrast, says staff are screened at the beginning and end of their shifts. Residents are monitored for symptoms and tested "if they present any potential signs or symptoms of the virus."

Revera uses similar language for homes with outbreaks in British Columbia and Manitoba.

The company has hired a private lab to test staff in some jurisdictions that do not require testing, Dr. Collins said. She declined to say where, citing a need to maintain "good relationships" with public health officials.

The importance of testing is COVID-101, said Samir Sinha, a geriatrician at Mount Sinai Hospital and member of the Revera panel. "Why did Revera have to hire a private lab?" he asked.

The company has come under harsh criticism from government officials in Manitoba. Health Minister Cameron Friesen has hired an independent expert to examine the deadly outbreaks at the Maples and Parkview homes in Winnipeg.

"Instead of pointing the finger at the privately owned homes and saying they're the culprits, we should be saying, how do we put a ring of protection around these homes," Dr. Bell said.

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